Docket No. STICK-001

Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled (INSERT TITLE) DENTAL OR MEDICAL DEVICE

(INSERT TITLE)	DENTAL OR MEL	DICAL DEVICE				,
the specification of w	hich					
(Check one of 1, 2, or 3.)	1 is attached hereto. 2 was filed on as					
I hereby state that I has as amended by any an	ave reviewed and unendment referred	inderstand the con to above.	tents of the above	e-identified specific	ation, including the	claim(s),
I acknowledge the dut of Federal Regulation	y to disclose all inf s, §1.56.	formation known to	o me which is ma	terial to patentability	y as defined in Title	: 37, Code
I hereby claim foreig inventor's certificate I having a filing date be	isted below and ha	ave also identified	below any forei	gn application for p	atent or inventor's	certificate
(List prior foreign					Priority (Claimed
foreign applications.)	(Number)	(Country)	(Day/Month/)	Year Filed)	Yes	No
	(Number)	(Country)	(Day/Month/)	Year Filed)	Yes	No
I hereby claim the ben as the subject matter o provided by the first p as defined in Title 37, the national or PCT in	feach of the claims aragraph of Title 3: Code of Federal Ro	of this application 5, United States Coegulations, §1.56, late of this applica	is not disclosed in ode, §112, I acknowhich occurred b	n the prior United Sta	ates application in t	he manner
I hereby appoint as pr		·		, ,		
Please direct all comm	nunications to the	following address:	James C. Lyd 100 Daingerf Suite 100 Alexandria, \ Telephone: (Facsimile: (ield Road /A 22314 703) 838-0445 703) 838-0447	ements made on in	nformation
and belief are believed and the like so made a and that such willful	l to be true: and fur	ther that these state	ements were mad	le with the knowleds	e that willful false:	statements
Full name of first or s		kka-VALLITTU		Date:	F 13 .	
Inventor's Signature:_				Date:	J 11.01	
Residence: Kylliä		620 Kuusisto, Fin	land			
Citizenship: Finnis			· 			
Post Office Address:	same as reside	ence				

Full name of second inventor: <u>Lippo LASSILA</u>	•
Inventor's Signature: hip has	Date: _ う.(2. とらい)
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Full name of third inventor:Ilkka KANGASNIEMI	
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Citizenship:	·
Full name of fourth inventor:	
Inventor's Signature:	Date:
Residence:	
Citizenship:	
Post Office Address:	
Full name of fifth inventor:	
Inventor's Signature:	Date:
Residence:	
Chizenship:	
Post Office Address:	
Full name of sixth inventor:	
Inventor's Signature:	Date:
Residence:	Date.
Residence:	
Citizenship: Post Office Address:	
Full name of seventh inventor:	
Inventor's Signature:	Date:
Residence:	
Citizenship:	
Post Office Address:	
Full name of eighth inventor:	
Inventor's Signature:	Date:
Residence:	
Citizenship:	
Post Office Address:	